



DECLARATION AND POWER OF ATTORNEY  
FOR PATENT APPLICATION

As the below-named inventor, I hereby declare that:

My residence, post office address and citizenship  
are as stated below next to my name.

I believe I am the original, first and sole inventor  
of the subject matter which is claimed and for which a patent  
is sought on the invention entitled METHODS OF EXTENDING  
CORNEAL GRAFT SURVIVAL, the specification of which

\_\_\_\_\_ is attached hereto as Attorney Docket No.

XX \_\_\_\_\_  
was filed on February 22, 2002 (Attorney  
Docket No. P-AR 4951) as Application  
Serial No. 10/081,126 and was amended on  
(or amended through) \_\_\_\_\_  
(if applicable)

I hereby state that I have reviewed and understand  
the contents of the above-identified specification, including  
the claims, as amended by any amendment(s) referred to above.

I acknowledge the duty to disclose information which  
is material to the examination of this application in  
accordance with Title 37, Code of Federal Regulations, Sec.  
1.56(a).

I hereby declare that all statements made herein of  
my own knowledge are true and that all statements made on  
information and belief are believed to be true; and further  
that these statements were made with the knowledge that  
willful false statements and the like so made are punishable  
by fine or imprisonment, or both, under Section 1001 of Title  
18 of the United States Code and that such willful false  
statements may jeopardize the validity of the application or

Inventor: Gerald W. DeVries  
Serial No.: 10/081,126  
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any patent issued thereon.

I hereby appoint the following attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

CATHRYN CAMPBELL, Registration No. 31,815; DAVID A. GAY, Registration No. 39,200; CALVIN A. FAN, Registration No. 38,444; ANDREA L. GASHLER, Registration No. 41,029; JAMES J. WONG, Registration No. 34,949; DEBORAH L. CADENA, Registration No. 44,048; MELANIE K. WEBSTER, Registration No. 45,201; ASTRID R. SPAIN, Registration No. 47,956; KIMBERLY J. PRIOR, Registration No. 41,483; JOHN T. MURPHY, Registration No. 50,583; PAMELA M. GUY, Registration No. 51,228; MARTIN A. VOET, Registration No. 25,208; ROBERT BARAN, Registration No. 25,806; CARLOS A. FISHER, Registration No. 36,510; STEPHEN DONOVAN, Registration No. 33,433; CYNTHIA O'DONOHUE, Registration No. 44,980.

Please direct all telephone calls to Cathryn Campbell at (858) 535-9001 and address all correspondence to:

CATHRYN CAMPBELL  
CAMPBELL & FLORES LLP  
4370 La Jolla Village Drive  
7<sup>th</sup> Floor  
San Diego, California 92122  
USPTO CUSTOMER NO. 23601

Full name of inventor: Gerald W. DeVries  
Inventor's signature: Gerald W. DeVries  
Date: 4-8-2002  
Residence: Laguna Hills, California  
Citizenship: United States of America  
Mailing Address: 25142 Bautista Drive  
Laguna Hills, California 92653